ATTACHMENT 6

Wisconsin Medicaid commercial health or dental insurance explanation codes for dental services

When submitting a claim to Wisconsin Medicaid containing one or more of the procedure codes listed in Attachments 9-12 of this *Wisconsin Medicaid and BadgerCare Update*, indicate one of the following commercial health or dental insurance codes in Element 33 of the ADA 2000 paper claim form.

Code	When to use code
OI-P (other insurance paid)	PAID in part or in full by commercial health insurance or commercial HMO. In Element 59, indicate the amount paid by commercial health insurance to the provider or to the insured.
OI-D (other insurance denied)	 Use OI-D for dental claims in either of the following situations: DENIED by commercial health insurance or commercial HMO following submission of a correct and complete claim, or payment was applied towards the coinsurance and deductible. YES, the recipient has commercial health insurance or commercial HMO coverage, but it was not billed for reasons including, but not limited to: ✓ The recipient denied coverage or will not cooperate. ✓ The provider knows the service in question is not covered by the carrier. ✓ The recipient's commercial health insurance failed to respond to initial and follow-up claims. ✓ Benefits are not assignable or cannot get assignment. ✓ Benefits are exhausted.
None	Providers may leave this element blank if none of the procedure codes on the claim are listed in Attachments 9-12.

Note: The provider may not use OI-D if the recipient is covered by a commercial HMO and the HMO denied payment because an otherwise covered service was not rendered by a designated provider. Services covered by a commercial HMO are not reimbursable by Wisconsin Medicaid except for the copayment and deductible amounts. Providers who receive a capitation payment from the commercial HMO may not bill Wisconsin Medicaid for services that are included in the capitation payment.